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**POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT**

**I hereby appoint:**

**OR**

☒ Practitioner(s) named below:

Name	Registration Number
Arnold M. de Guzman	39,955
James K. Okamoto	40,110
Patrick D. Benedicto	40,909

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

**Please change the correspondence address for the above-identified application to:**

☐ The above-mentioned Customer Number.

**OR**

☐ Practitioners at Customer Number

**OR**

☒ Firm of

**Individual Name**

DEGUZMAN OKAMOTO & BENEDICTO, LLP

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**I am the:**

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

**SIGNATURE of Applicant or Assignee of Record**

Name \_\_\_\_\_

Mira Ben-Tzur

**Signature**

M. Br. F.

Date \_\_\_\_\_

Feb 4, 2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 2 forms are submitted.

<b>Application Number</b>	not yet known
<b>Filing Date</b>	not yet known
<b>First Named Inventor</b>	Mira Ben-Tzur
<b>Group Art Unit</b>	not yet known
<b>Examiner Name</b>	not yet known
<b>Attorney Docket Number</b>	10002.000400 (PM01045)

Place Customer  
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Name	Registration Number
Arnold M. de Guzman	39,955
James K. Okamoto	40,110
Patrick D. Benedicto	40,909

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☒ Total of 2 forms are submitted.

**Burden Hour Statement:** This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO:** Assistant Commissioner for Patents, Washington, DC 20231.

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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input checked="" type="checkbox"/> Declaration Submitted With Initial Filing      OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	10002.000400 (PM01045)
	First Named Inventor	Mira Ben-Tzur
	<b>COMPLETE IF KNOWN</b>	
	Application Number	not yet known
	Filing Date	not yet known
	Group Art Unit	not yet known
	Examiner Name	not yet known

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**DUAL-DAMASCENE PROCESS AND ASSOCIATED FLOATING METAL  
STRUCTURES**

the specification of which (Title of the Invention)

☒ Is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [ ] as United States Application Number or PCT International

Application Number [ ] and was amended on (MM/DD/YYYY) [ ] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

2020-10-22 10:00:00

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# DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number or Bar Code Label		<input checked="" type="checkbox"/> Correspondence address below	
deGuzman Okamoto & Benedicto LLP			
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Address			
Palo Alto	California	94303	
City	State	ZIP	
U.S.A.	650-691-2030	650-691-2032	
Country	Telephone	Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Mira		Family Name or Surname Ben-Tzur	
Inventor's Signature <i>M. B. Tzur</i>		Date Feb 4, 2002	
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Mailing Address			
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City	State	Zip	Country
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Krishnaswamy		Family Name or Surname Ramkumar	
Inventor's Signature <i>Kr...</i>		Date 2/4/02	
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City	State	Zip	Country
<input checked="" type="checkbox"/> Additional inventors are being named on the 2 supplemental inventor(s) sheet(s) PTO/SB/02A attached hereto.			